

Morbidity and Mortality in Early Infancy

Infant mortality in the United States, as evidenced by records available since the organization of the birth registration area in 1915, has declined rather steadily. The rates in the Mountain and Southern States are somewhat higher than in the three other broad regions—the Northeast, North Central, and Pacific sections.

Trends of infant mortality of males and females are parallel but the rates for females are considerably lower than those for males. Considering actual rates by age of the infant, the older the infant the more rapid the percentage decline in infant death rates.

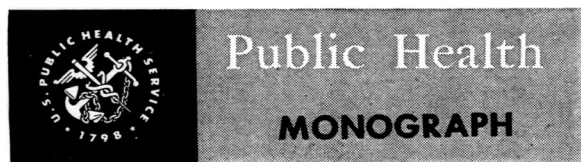
Reduction of rates to a comparable annual basis indicates extremely high mortality from all causes at the ages under 1 day and 1–2 days, with an uninterrupted decline with age in the rates for the 12 months of the first year of life.

Among infants of all ages under 1 year, the most frequent causes of illness are respiratory, digestive, communicable, and congenital malformations and diseases of early infancy. In contrast, the most frequent causes of death are immaturity, both with and without various diseases of early infancy, and congenital malformations. Pneumonia also stands high as a cause of infant mortality.

In five broad diagnosis groups for illness and mortality, infant illness rates for females are generally below those for males, and infant mortality rates for females are almost uniformly lower than for males.

Considering an immature infant as one weighing 2,500 gm. or less at birth, and a mature infant as one weighing 2,501 gm. or more at birth, the neonatal infant mortality from all causes and from specific causes among the mature as compared with the immature was extremely small. However, neonatal mortality among infants weighing 4,501 gm. or more at birth was somewhat higher than at the minimum, which occurred among infants weighing 3,501–4,000 gm.

Whooping cough, measles, and chickenpox had relatively high incidence rates during the first year of life, and mumps and german measles, rather low rates in that period. Whooping cough and chickenpox had relatively high secondary attack rates but measles, german measles, and mumps had relatively low such rates.



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The accompanying summary covers the principal findings presented in Public Health Monograph No. 31, published concurrently with this issue of Public Health Reports. The authors are with the Division of Public Health Methods, Public Health Service.

Readers wishing the data in full may purchase copies of the monograph from the Superintendent of Documents, Government Printing Office, Washington 25, D. C. A limited number of free copies are available to official agencies and others directly concerned on specific request to the Public Inquiries Branch of the Public Health Service. Copies will be found also in the libraries of professional schools and of the major universities and in selected public libraries.

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Collins, Selwyn D., Trantham, Katharine S., and Lehmann, Josephine L.: Illness and mortality among infants in the first year of life. Public Health Monograph No. 31 (Public Health Service Publication No. 449). 20 pages. Illustrated. U. S. Government Printing Office, Washington, D. C., 1955. Price 15 cents.